



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number 150617		3. This Statement covers From: 9/5/12 to Oct 21, 2012	
2. Committee Name Friends of Jeff Rahl		4. Candidate Last Name Rahl First Name Jeffrey A	
5. Committee's Mailing Address 204 Frances St Auburn, MI 48611 (989) 450-1938 Area Code and Phone		4a. Office Sought Including District # or Community Served (If applicable) Bay county commissioner, District #	
6. Treasurer's Name & Residential Address Kyrsten Flapd 5925 Jefferson Ave Midland, MI 48640 (989) 859-3235 Area Code & Phone		4b. County of Residence Bay	
7. Treasurer's Business Address Same as Home (Box 6) Area Code and Phone (989) 859-3235		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) BY [Signature] Oct 25 2 20 PM '12 Area Code and Phone	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus 11/6/12		9c. <input type="checkbox"/> Annual Statement (Coverage Year) 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.			
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper Kyrsten Flapd Type or Print Name		Kyrsten K Flapd Signature Date 10/21/12	
Candidate Jeff Rahl Type or Print Name		[Signature] Signature Date 10/21/12	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

150617

2. Committee Name

Friends of Jeff Pahl

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$

1605.00

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$

NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$

1605.00

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$

0

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$

1605.00

Column I
This Period

Column II
Cumulative this election cycle

(18.) \$

1605.00

(19.) \$

0

(20.) \$

1605.00

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$

0

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$

0

(21.) \$

0

(22.) \$

0

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$

1117.76

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$

0

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$

0

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$

1117.76

(23.) \$

1117.76

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$

n/a

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$

(24.) \$

n/a

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$

0

b. Owed to the Committee (Schedule 1E)

(12b.) \$

0

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)

(13.) \$

0

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$

1605.00

15. SUBTOTAL Add lines 13 and 14

(15.) = \$

1605.00

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$

1117.76

17. ENDING BALANCE
(Subtract line 16 from line 15)

(17.) \$

487.24

Oct 25 2 20 PM '12

FILED
10th JUDICIAL
CIRCUIT COURT



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150617
2. Committee Name Friends of Jeff Pahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>9/5/12</u></p> <p>Name & Address: <u>C.J. Heim</u> <u>705 Michigan</u> <u>Bay City, MI 48706</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Supply Sergeant</u> Employer <u>US military</u> Business Address <u>2510 E Wilder Rd Bay city, 48706</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/30/12</u></p> <p>Name & Address: <u>Darren Knauth</u> <u>2671 N. 8 mile Rd</u> <u>Pinconning, MI 48050</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/30/12</u></p> <p>Name & Address: <u>Jim Heim</u> <u>705 Michigan</u> <u>Bay City, MI</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address: <u>Connie Steger</u> <u>1308 Timber</u> <u>Midland, MI 48042</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	

Page Subtotal

320

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

150017

2. Committee Name

Friends of Jeff Rahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Randy + Mary Mudd 4781 Putt Ln Auburn, MI 48611		9/30/12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 25	\$ 25
		Click Here for Memo Itemization	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Brian + Tina Bacigalupo 1911 E. Salzburg Bay City, MI		9/30/12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 50	\$ 50
		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Barb Khola 1883 Midland Rd Bay City, MI		9/30/12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 20	\$ 20
		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Don Tilley 617 Green Ave Bay City, MI 48708		9/30/12	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 20	\$ 20
		Click Here for Memo Itemization	

Page Subtotal

115.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

150617

2. Committee Name

Friends of Jeff Pahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Brooke + Allan Garcia
817 Harding
Essexville, MI 48732

\$ 20

\$ 20

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Larry + Janet Pahl
302 Tianna Dr.
Auburn, MI 48611

\$ 25

\$ 25

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Judy Metz
249 Sycamore Ln
Auburn, MI 48611

\$ 20

\$ 20

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

William Peidoo
804 Frances
Auburn, MI 48611

\$ 10

\$ 10

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

75

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

150617

2. Committee Name

Friends of Jeff Pahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 9/30/12

Name & Address:

Joe + Jess Willey
3389 Northwood Dr
Bay City, MI

\$ 20

\$ 20

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

Dave + Laura Jesse
4775 Bramwood Ct
Auburn, MI 48801

\$ 20

\$ 20

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

Mark Piotrowski
4786 Birnbaum
Bay City, MI

\$ 20

\$ 20

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

Christina Lagalo
1915 Fitzgerald St
Bay City, MI

\$ 20

\$ 20

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

80.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

150617

2. Committee Name

Friends of Jeff Kahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Tom + Karen Rajewski
1167 Stanley
Auburn, MI 48001

\$ 20

\$ 20

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Kirsten Floyd
5625 Jefferson
Midland, MI 48640

\$ 25

\$ 25

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9/30/12

Name & Address:

Jan Reising
404 Southtown
Auburn, MI 48001

\$ 10

\$ 10

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

Name & Address:

Jesse Metz
214 Sycamore Ln
Auburn, MI 48001

\$ 20

\$ 20

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

75.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150617
2. Committee Name Friends of Jeff Rahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/30/12</u>	
Name & Address: <u>Matt Schmidt</u> <u>2316 Gushow Lane</u> <u>Auburn, MI 48611</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>9/17/12</u>	
Name & Address: <u>IBEW Pac. voluntary Fund</u> <u>900 7th St NW</u> <u>Washington, DC 20001</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>10/12/12</u>	
Name & Address: <u>Numbers + SteamFilters 85 PAC</u> <u>6705 Weiss St</u> <u>Saginaw, MI 48608-6547</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/2/12</u>	
Name & Address: <u>Mary Ellen Gushow</u> <u>1678 W. Midland</u> <u>Auburn, MI 48611</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

740.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150617
2. Committee Name Friends of Jeff Pahl

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/20/12</u> Name & Address: <u>Michigan Laborers Political League PAC</u> <u>118 Centennial Way Ste 100</u> <u>Lansing, MI 48917</u>		<u>\$ 100.00</u> <u>\$ 100.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/2/12</u> Name & Address: <u>Renee Candian</u> <u>5429 Lisa Drive</u> <u>Bay City, MI 48706</u>		<u>\$ 100.00</u> <u>\$ 100.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>K/C Welding Supply Inc.</u> Business Address <u>1309 Main St</u> <u>Essexville, MI 48732</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____		\$ _____ \$ _____	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____		\$ _____ \$ _____	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

200.00
1505.00 1605.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150617
2. Committee Name Friends of Jeff Kahl

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Auburn Foodcenter</u> Address <u>985 W. Midland</u> <u>Auburn, MI 48611</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser</u> <u>supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/29/12</u> Date	<u>\$ 76.34</u>
Expenditure #2 Name <u>Auburn Food center</u> Address <u>985 W. Midland</u> <u>Auburn, MI 48611</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ICE CREAM</u> <u>for fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/30/12</u> Date	<u>\$ 45.43</u>
Expenditure #3 Name <u>Auburn Foodcenter</u> Address <u>985 W. Midland</u> <u>Auburn, MI 48611</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/30/12</u> Date	<u>\$ 62.94</u>
Expenditure #4 Name <u>Dollar General</u> Address <u>404 W. Midland Rd</u> <u>Auburn, MI 48611-9418</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/30/12</u> Date	<u>\$ 32.84</u>
Expenditure #5 Name <u>Sawrecki + Sons</u> Address <u>1521 W. Lafayette</u> <u>Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>uprd signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/12</u> Date	<u>\$ 667.27</u>

Subtotal this page 884.82

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150617
2. Committee Name Friends of Jeff Kahl

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Dornbos Printing</u> Address <u>1131 E. Genessee Ave.</u> <u>Saginaw, MI 48607</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>postcards for door-to-door</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/12</u> Date	\$ <u>157.94</u>
Expenditure #2 Name <u>City of Auburn</u> Address <u>113 E. Elm St.</u> <u>Auburn, MI 48611</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>rent facility</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/20/12</u> Date	\$ <u>7.5</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 232.94

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1117.76

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150617
2. Committee Name Friends of Jeff Pahl

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>9/30/12</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>49</u>	5. Type of Fund Raising Activity <u>Ice cream social</u>	6. Address and Name (If any) of the place where the activity was held. <u>Auburn city Park</u> <u>435 S. Auburn</u> <u>Auburn, MI 48611</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 435.00
8. Other Receipts ~~292.55~~
9. Gross Receipts (Add lines 7 and 8) 435.00
10. Total Cost of Event 292.55
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE
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LATE CONTRIBUTION REPORT

1. Your Committee ID#: 150617
2. Your Committee Name: Friends of Jeff Raht
3. Date Late Contribution(s) Received: 10/29/12 (Only one Date per Sheet)

<ul style="list-style-type: none">• Late Contribution Reports are required when a<ul style="list-style-type: none">○ Candidate committee receives a single contribution or a cumulative contribution from the same contributor of \$500.00 or more after the closing date of the last campaign statement required and the 3rd day before an election where the candidate is participating. See <u>Appendix G</u> of the Campaign Finance Manual.○ A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a single contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the closing date of the last campaign statement required and the 3rd day before an election. See <u>Appendix G</u> of the Campaign Finance Manual.• Contributions are anything of monetary value including contributions of money, in-kind and loans to the committee.• Late Contribution Reports are not waived by the Reporting Waiver.• Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximum fee is \$2,000.00 per report.• Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution with your Filing Official.• Electronic Filers on the state level must file all Late Contribution Report <u>electronically</u>.• The Late Contribution must also be reported on the next Campaign Statement owed by the committee.		
4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor. Contributor Name and Address: <u>IBEW POC Voluntary Fund</u> <u>900 7th St NW</u> <u>Washington, DC 20001</u> (If Individual, also provide:) Occupation _____ Employer / Business Address _____	5. Amount <u>\$ 500</u>	
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____		
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____		
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____		